

Exhibit G



FREIBERGER & WASHIENKO, LLC

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PATRICIA A. WASHIENKO, ESQ.
pwashienko@fwlawboston.com | EXT. 101

March 4, 2019

Via Electronic and First-Class Mail

Cynthia.garcia@state.ma.us

Cynthia Garcia, Clerk
Massachusetts Commission Against Discrimination
One Ashburton Place
Sixth Floor, Room 601
Boston, MA 02108

Re: Charu Desai, M.D. v. University of Massachusetts Memorial Medical Center, et al.
MCAD No.: 18WEM01247; EEOC No.: 16C-2018-01520

Charu Desai, M.D. v. Marlborough Hospital and Karin Dill, M.D.
MCAD No.: 19WEM00371; EEOC No.: 16C-2019-00939

Dear Ms. Garcia:

In connection with the above-referenced matters, enclosed herein please find for filing Complainant's requests to withdraw her two Charges of Discrimination filed with the Commission. Please note that Complainant is requesting to withdraw from both matters.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'PAW', with a long horizontal flourish extending to the right.

Patricia A. Washienko

PAW/ya

Enclosures

cc: Charu Desai, M.D.
Karllyn Greene, Investigator (by First-Class Mail only)
Patricia LaFore, Investigator (by First-Class Mail only)
Robert L. Kilroy, Esq. (By Email Only; rkilroy@mirickoconnell.com)
Jessica K. Rubin, Esq. (By Email Only; jrubin@mirickoconnell.com)
Michael P. Murphy, Esq. (By Email Only; mmurphy@mirickoconnell.com)

COMMONWEALTH OF MASSACHUSETTS
COMMISSION AGAINST DISCRIMINATION

From:

To:

Massachusetts Commission Against Discrimination
One Ashburton Place, Room 601
Boston, MA 02108
FAX: 617-994-6024

Re: Charu Desai, M.D. v. University of Massachusetts Memorial Medical Center, et al.

MCAD Docket Number 18WEM01247; EEOC No: 16C-2018-01520

Dear Commissioner:

I hereby request permission to withdraw my complaint filed with this Commission and if applicable, from the Equal Employment Opportunity Commission, for the following reason:



I wish to file a private right of action in civil court.



I have reached a satisfactory settlement with the Respondent.



I no longer intend to pursue this matter at the Commission.

Authorization for this request is indicated by the following Certification of Withdrawal by Complainant, OR Certification of Authorization to Withdraw by Counsel.

Certification of Withdrawal by Complainant

I have been advised that it is unlawful for any person or persons to threaten, intimidate, or harass me because I filed a complaint. I have not been coerced into requesting this withdrawal.

Date

Complainant's signature

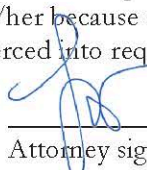
Print Name

Certification of Authorization to Withdraw by Counsel

I have been authorized as Counsel of Record for the Complainant and have the authority and permission to sign for the Complainant in this matter. I have advised the Complainant that it is unlawful for any person or persons to threaten, intimidate, or harass him/her because s/he filed a complaint. Complainant has represented that s/he has not been coerced into requesting this withdrawal.

03/04/19

Date



Attorney signature

Patricia A. Washienko

Print Name

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COMMISSION AGAINST DISCRIMINATION

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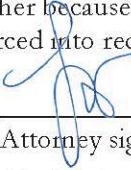
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02/28/19

Date



Attorney signature

Patricia A. Washienko

Print Name